

NEW JERSEY VOLUNTARY DISCLOSURE FACT PATTERN FORM

1) Type of Business entity:
[] Corporation, accounting period ending:;
[] Limited Liability Company;
[] Limited Partnership;
[] Individual;
[] other (specify):
[] other (speedly).
If LLC or other, what form is filed for Federal Tax purposes:
2) Did this entity receive a Nexus Questionnaire or any other notification from New Jersey
[] no;
[] yes, explain:
[] yes, explain
3) Taxes currently registered in New Jersey for:
[] NONE
Sales and Use;
[] Corporation;
[] Partnership;
[] Withholdings;
[] Personal Income;
[] other (specify):
[] other (specify).
4) Taxes requested for Disclosure:
[] Sales and Use.
Were Sales Taxes collected but not remitted?
[] yes, specify first date:
[] Corporation;
[] Partnership;
[] Withholdings;
[] Personal Income;
[] other (specify):
Type of business activity:
Date activity first commenced in New Jersey:
Attach additional sheet(s), if necessary.
(1 of 2 - 0.7 - 0.1 - 1.0)



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Contact Person name:	
Firm name:	
Mailing address:	
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Phone number:	
Fax number:	
E-mail address:	
Signature:	
Date:	
Date	
Return this form to: Nicholas J. Solimando, Auditor	
New Jersey Division of Taxation	

PO Box 269 (regular mail service) -or-50 Barrack St 5th Floor (courier only) Trenton, NJ 08695-0269

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